FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
Section 16. Form 4 or Form 5	

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*  Grossman Adam S					2. Issuer Name <b>and</b> Ticker or Trading Symbol ADMA BIOLOGICS, INC. [ ADMA ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last) (First) (Middle) C/O ADMA BIOLOGICS, INC. 465 STATE ROUTE 17						3. Date of Earliest Transaction (Month/Day/Year) 06/19/2014										X Officer (give title below)  President &			pecify
(Street) RAMSEY NJ 07446  (City) (State) (Zip)					4. 1	If Ame	ndment, [	Date o	of Original F	iled	(Month/Da	Line)	Individual or Joint/Group Filing (Check Applicable le)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
			le I - Nor			_			<del></del>	Disp		-			_				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					ear)   i	2A. Deemed Execution Date if any (Month/Day/Yea		Code (Instr.						5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	V	Amount	Amount (A)		Price	Transaction(s) (Instr. 3 and 4)				
		-	Table II -						uired, Di , option:						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemee Execution I if any (Month/Day	Date,	4. Transa Code ( 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exe Expiration (Month/Day	Date		7. Title and Amou of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				Co	Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	or Nui of	umber					
Options to purchase	\$8.5 <sup>(1)</sup>	06/19/2014			A		99,309		(2)	0	6/18/2024	Commor	99	,309	\$0	99,309		D	

## **Explanation of Responses:**

- 1. The exercise price reflects the per share fair market value of the Company's common stock, as determined by the closing price of the Company's common stock on the OTC Bulletin Board on February 21, 2014, the date that the option grant was approved by the Company's board of directors, subject to stockholder approval of the 2014 Omnibus Incentive Compensation Plan (the "Plan") under which the option was granted. The Company's stockholders approved the Plan on June 19, 2014.
- 2. These options vest over four years with 25% vesting on the one year anniversary of the date of grant and the remaining 75% vesting monthly in equal installments over the next three years.

/s/ Adam S. Grossman

06/19/2014

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.